

8-26-04

3731



PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:

JOSEPH C. TRAUTMAN, ET AL.

APPLICATION NO.: 09/976,763

FILED: OCTOBER 12, 2001

FOR: MICROBLADE ARRAY IMPACT  
APPLICATOR

EXAMINER: VICTOR NGUYEN

ART UNIT: 3731

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Examiner Nguyen:

As requested, attached is a further copy of the Response to Restriction Requirement, filed on February 12, 2004 and the proof of filing thereon.

Date: 8/18/04

Respectfully submitted,

Ralph Francis  
Attorney for the Applicant  
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Susan Ahearn

8/24/04

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

		Application Number	09/976,763
		Filing Date	October 12, 2001
		First Named Inventor	Joseph C. Trautman
		Art Unit	3731
		Examiner Name	NGUYEN, Vi X.
Total Number of Pages in This Submission	15	Attorney Docket Number	ARC 2972 R1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Associate Power of Attorney
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Ralph C. Francis; Francis Law Group; Registration No. 38,884
Signature	
Date	02/12/04

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Susan Ahearn		
Signature		Date	02/12/2004

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